

Attorney's Docket 081289-0294309

Client Reference:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Inventor: PATENT APPLICATION of:
TIMOTHY A. HOVANEC ET AL.

Confirmation Number: 7889

Application No.: 10/659,948

Group Art Unit: 1651

Filed: September 10, 2003

Examiner: Marx, Irene

For: METHOD OF USING AMMONIA-OXIDIZING BACTERIA

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT/RESPONSE TRANSMITTAL

Transmitted herewith is an amendment/response for this application.

EXTENSION OF TIME

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for a 1 month extension of time under 37 C.F.R. 1.136.

FEES

The fee for claims and extension of time (37 C.F.R. 1.16 and 1.17) has been calculated as shown below:

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE |
|--|---|---------------------------------------|------------------|----------------|---------------|
| TOTAL | 10 | - 21 | = 0 | X \$ 50.00 | = \$ 0.00 |
| INDEP. | 4 | - 7 | = 0 | X \$ 200.00 | = \$ 0.00 |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | + \$ 360.00 | = \$ 0.00 |
| TOTAL ADDITIONAL CLAIM FEE | | | | | \$ 0.00 |
| REQUEST FOR CONTINUED EXAMINATION FEE | | | | | \$ 790.00 |

EXTENSION OF TIME FEE \$ 120.00

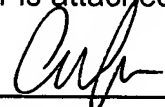
GRAND TOTAL \$ 910.00

FEE PAYMENT

Authorization is hereby made to charge the amount of \$910.00 to Deposit Account No. 033975. Charge any additional fees required by this paper or credit any overpayment in the manner authorized above. A duplicate of this paper is attached.

Date: 9/10/07

PILLSBURY WINTHROP SHAW PITTMAN LLP
725 South Figueroa Street
Suite 2800
Los Angeles, CA 90017-5406
213 488.7238


CAROLYN S. LU
Reg. No. 56,817

CERTIFICATION UNDER 37 C.F.R. §§ 1.8 and/or 1.10*

(When using Express Mail, the Express Mail label number is *mandatory*; Express Mail certification is *optional*.)

I hereby certify that, on the date shown below, this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

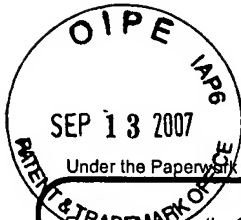
Date: September 10, 2007


Signature

KUMIKO ALEXANDER

(type or print name of person certifying)

* Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.



SEP 13 2007

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Filed Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 910.00**Complete if Known**

| | |
|----------------------|--------------------|
| Application Number | 10/659,948 |
| Filing Date | September 10, 2003 |
| First Named Inventor | TIMOTHY A. HOVANEC |
| Examiner Name | Marx, Irene |
| Art Unit | 1651 |
| Attorney Docket No. | 081289-0294309 |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 033975 Deposit Account Name: PILLSBURY WINTHROP SHAW PITTMAN LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION** (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |
| Total Claims | | |
| Extra Claims | | |
| Fee (\$) | | |
| Fee Paid (\$) | | |

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|---------------------|---------------------|---|-----------------|----------------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| _____ - 100 = _____ | _____ / 50 = _____ | (round up to a whole number) x | 250.00 | 0.00 |

4. OTHER FEE(S)

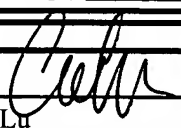
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): RCE / Petition for one-month extension of time

Fees Paid (\$)

910.00

SUBMITTED BY

| | | | | | |
|-------------------|---|-----------------------------------|--------------------|-----------|--------------|
| Signature |  | Registration No. (Attorney/Agent) | 56,817 | Telephone | 213.488.7238 |
| Name (Print/Type) | Carolyn S. Lu | Date | September 10, 2007 | | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.